Simulation with Limited Staff and Space

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Purpose/Aims

- Identify minimum area needed to accommodate an effective, multidisciplinary program.
- To design a space that can serve the needs of programs in a cost-effective manner.
- To maximize the use of space to accommodate multiple programs.
- To develop a simulation center that can be used by various programs.

Methods

- Consideration of “Best Practices” such as the consideration of “Fidelity (also known as Authenticity)” to determine the degree to which a simulated experience approaches reality.
- Realism/Authenticity refers to the degree to which a simulated experience approaches reality.
- The level is determined by the environment, tools, and equipment used by the participants.

Findings/Review

- Working with various programs such as Nursing, Paramedicine, Fire Science, Law Enforcement, and Surgery Tech to provide simulations where multiple resources, ideas, labs, staff are used.
- Using mobility and flexibility to meet the needs of various programs and to facilitate multi-incident simulation scenarios.
- Mobility was a huge asset: with mobile cameras, simulators that were battery powered, small laptops.

Background

The simulation program at WDT started in 2014 with financial assistance from the Trade Adjustment Assistance Community College and Career Training (TAACCCT) grant through the Department of Labor. One of the goals for this grant was to develop on-site training and simulation labs for the following programs: nursing, paramedics, emergency medical technicians, surgery techs, medical assistants, and certified nursing assistants. With the grant funding being spread across so many programs, each funded area had monetary limits to work within.

The simulation center has been up and running since September of 2014. Currently two staff members provide educational and simulation expertise to both faculty and students, operate the simulation lab from the old library, maintain equipment, facilitate simulation experiences, and provide simulation experiences to the community.

Richard Pizz, CEO of Laelaw BRENNINGER Architects and a SDH and NSHE member identifies medical education and simulation centers floor space to have a “sweet spot” of 5,000 sf to 10,000 sf. Our current room is about the size of 1 and ½ classrooms of regular size, approximately 35' x 50' or roughly 1,750 sf. If you add the storage room, control room, and debriefing room footage this increases the footage to roughly 3,500 sf. The staff have not been allowed to make any permanent alterations to the area other than to have a one way mirrored window put in between the control room and the larger simulation lab, that could be used to observe the simulation lab. Curtains were used on one side of the space and there (25' x 75') was installed on the other side to serve as an emergency setting for our paramedic and EMT students.

One of the divided areas is set up to look like a doctors office and other simulations are performed in this space. Each patient is made to look as realistic as possible, adding moulage and etcetera.

We offer ideas and options to other facilities that may have to provide effective simulation scenarios within limited space and personnel parameters.